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Bib Data Sheet

CONFIRMATION NO. 6652

|                             |  |              |                        |                                      |
|-----------------------------|--|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER<br>10/671,041 | FILING OR 371(c)<br>DATE<br>09/25/2003<br>RULE | CLASS<br>205 | GROUP ART UNIT<br>1753 | ATTORNEY<br>DOCKET NO.<br>U 014827-2 |
|-----------------------------|--|--------------|------------------------|--------------------------------------|

**APPLICANTS**

Rei-Yian Chen, Hsinchu Hsien, TAIWAN;  
 Chih-Yi Chang, Changhua Hsien, TAIWAN;  
 Tung-Hsiang Liu, Taoyuan Hsien, TAIWAN;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a DIV of 10/096,543 03/13/2002 PAT 6,686,827

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

TAIWAN 090107277 03/28/2001

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***

\*\* 12/19/2003

|   |                            |                        |                    |                         |
|---|----------------------------|------------------------|--------------------|-------------------------|
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no  | STATE OR COUNTRY<br>TAIWAN | SHEETS<br>DRAWING<br>9 | TOTAL CLAIMS<br>20 | INDEPENDENT CLAIMS<br>2 |
| 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br><i>Allowance</i> |                            |                        |                    |                         |
| Verified and Acknowledged<br><i>09/11/07</i><br>Examiner's Signature  | Initials                   |                        |                    |                         |

**ADDRESS**

140

**TITLE**

Surface mountable laminated circuit protection device and method of making the same

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|----------------------------|---|---|
| FILING FEE RECEIVED<br>375 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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